Carl Moyer Program Quarterly Progress Report

Company Name:		Contract No:	
Project Description:			
Reporting Period From:	to:		
Any change(s) from the Previo		• YES ease complete report if	○ NO Fyou select YES
Current Progress:			
Unit #	Purchase Order Placed (if Yes, provide Date)	Received Date	Date Placed into Service
	○ Yes		
	O No		
	○ Yes		
	O No		
	○ Yes		
	O No		
	○ Yes		
	O No		
	O Yes		
	O No		
Operation: Use Gallons, Mileag	ros or Uours par quartar by	aquinment	_
Unit #	Usage		
Comments/Operational Issues/Problems:			
Date last piece of equipment is put into service:			
Name/Title of person preparing the progress report:			
Contact Phone Number:			